



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

# Public Health Preparedness and Response UPDATE

Keeping You Informed

November 2004

## Health Resources and Services Administration Grant Renewed for \$9.5 million

The \$9.5 million Health Resources and Services Administration (HRSA) grant received this year will continue to support hospital preparedness. This is the same amount as last year's funding and will focus on the six HRSA priority areas including Administration; Surge Capacity; Emergency Medical Services; Linkages to Public Health Departments; Education and Preparedness Training; and Bioterrorism Preparedness Exercises. The funding will be used to upgrade the state's health care system through enhanced disease reporting systems, personal protective equipment, decontamination equipment, and communications systems. This funding will also enable hospitals throughout the state to be better prepared to handle epidemics of rare diseases, exposures to chemical toxins, and mass casualties. Last year, special emphasis was placed on getting the metropolitan statistical areas of St. Louis, Kansas City, and Springfield ready to meet the surge capacity criteria established by HRSA. This year funds will be used to enhance their preparedness. The Columbia/Jefferson City metropolitan statistical area and Region E will also be funded to assist them in meeting the HRSA criteria. The Center for Emergency Response and Terrorism will receive supplemental HRSA funding to collaborate with the State Board of Nursing to develop an emergency system for advance registration of volunteer healthcare personnel. This web-based system will increase the ability to rapidly contact and deploy health professionals during a terrorist attack or public health emergency. Funding is also being used to enhance Disaster Medical Assistance Teams in the St. Louis and Springfield areas and to organize a team in the Kansas City area.

## Suspicious Powders 101

Scenario: A suspicious white powder is discovered in a letter and is reported to the FBI.

*Have you ever wondered . . . what happens next?*

1. Specially trained FBI agents, local hazardous materials (HazMat) teams, and other first responders are dispatched to the scene. One of the on-site agents immediately contacts FBI Headquarters - Counterterrorism, which assembles a multi-agency team for threat assessment/response. The Headquarters team helps first responders address safety concerns, handle evidence properly, and develop an investigative plan.
2. The on-site team tests the material for radiation, volatile chemicals, pH and other characteristics; wraps it in an airtight package and sends it to the Missouri State Public Health Laboratory which then performs a series of tests for biological agents.

\* If the field screen is negative, the team leaves the area.

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(continued from page 1)

- \* If it's positive, 1) the local area is shut down and tested by HazMat teams in protective suits; and 2) people who had any contact with the powder are identified, decontaminated, and possibly examined at a hospital as a precaution.
3. If a threat letter has been found, the State Public Health Laboratory samples material from the letter, returns the letter to the FBI agent and then performs a series of tests for biological agents. The local FBI agent then sends it to the FBI Laboratory in Quantico, VA, to test for clues like fingerprints, hair samples, and — if the postage stamp/envelope has been licked — DNA. The letter's language and writing, which could provide important clues, are analyzed by the FBI Behavioral Science Unit.
  4. Once lab tests determine definitively whether the powder is hazardous or not, the FBI works with the CDC and state and local health departments to advise the public whether the threat is real or a hoax.
  5. The evidence of the case is presented to the U.S. Attorney to determine whether it should be prosecuted; if not, the case is closed. If so, a full investigation is begun, even cases involving harmless substances can, of course, be prosecuted because it's a violation of federal law to even threaten the use of a Weapon of Mass Destruction — including anthrax and other biological agents. The threat letters and substances collected during investigations are securely maintained as case evidence.

The number of reports of suspicious powders increased dramatically after the October 2001 anthrax mailings that resulted in five deaths. In 2002, the FBI responded to some 2,500 reports of the use or threatened use of anthrax or other biological agents. Full investigations were opened in 305 of them.

### ***What should you do if you come across a suspicious white powder?***

- \* Handle with care - don't shake or bump.
- \* Isolate and look for indicators.
- \* Don't open, smell, or taste.
- \* Treat it as suspect - call 911!

*Source: Federal Bureau of Investigation Headline Archives*

## **Community Support Lends a Helping Hand to the Success of the Springfield-Greene County Health Department**

*This is the second in a series of articles highlighting local public health agencies.*

*by Jaci McReynolds, Public Health Information Specialist, Springfield-Greene County Health Department*

"The tremendous support and trust we have from our community regarding public health issues helps us stand out," says Springfield-Greene County Health Department Director, Kevin Gipson. "We are so fortunate to work in a community with public health minded agencies and institutions."

The recent influenza vaccination shortage attests to the strength of these partnerships. Last month the health department worked with community partners to provide approximately 5,000 flu vaccinations to high-risk individuals. Gipson says, "The community flu clinics we planned in partnership with our hospitals, medical society, and SMSU are perfect examples."

Although the influenza vaccine shortage was not the result of bioterrorism, the Springfield-Greene County Health Department applied its bioterrorism planning to its response. This bioterrorism planning has been in process for years.

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Even before the tragic events of September 11, 2001 and the anthrax attacks that followed, the Springfield-Greene County Health Department was preparing to respond to an act of bioterrorism. The department has an active 26-member Emergency Response Team that is on call 24 hours a day, 7 days of week to respond to terrorist attacks and public health emergencies.

The Springfield-Greene County Health Department has also worked to expand its Health Alert Network. The network includes more than 2,000 contacts that can be quickly notified via fax or email in the event of a terrorist attack or public health emergency. The network covers six counties – Christian, Greene, Polk, Stone, Taney, and Webster – and includes physicians, veterinarians, pharmacists, media, grocery stores, local public health, law enforcement, and other groups. In November the network was utilized to alert physicians of an increase in pertussis cases in Greene County.

Community Health Planner Karen McKinnis, says, “Planning efforts have increased the internal plans for the department, cross training efforts, daily capacity and the ability to provide more than just normal daily services.” She adds, “The regional approach that the bioterrorism team has innovated and proactively implemented is a great model for public health.” Much of the preparation for the large-scale community flu vaccination clinic was based on mass prophylaxis exercises the Springfield-Greene County Health Department’s bioterrorism staff planned, participated in, or observed. In April 2004, they helped plan a regional exercise with fellow members of the Region D Bioterrorism/Emergency Response Team (BERT). This event provided an opportunity for the twenty health departments in Region D to pick up simulated medication at area dispensing sites and open medication dispensing sites within their own counties.

In September 2004, the Springfield-Greene County Health Department also launched its innovative Community Heroes program. This regional program seeks to recruit, train, and retain volunteers to respond to public health emergencies across southwest Missouri. Community Heroes partners with local Citizen Corps and Emergency Management Offices to provide cross training and cross utilization with existing Community Emergency Response Team (CERT) programs.

The Community Heroes program gives volunteers education opportunities, training, and experience during times of peace. Educator/Volunteer Coordinator Rebecca Burton says, “Community Heroes encourages people to get involved in emergency preparedness before an emergency happens. Then when the disaster strikes, they can respond more rapidly and efficiently.”

Director of Health, Kevin Gipson, also mentions the Springfield-Greene County Health Department’s community assessment and data management programs as being best practices. He says, “Our work is being replicated throughout the community, the state, and the country. We have many other activities that I believe are best practices, but our assessment process is cutting edge.”

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*Prepared by the DHSS Office of Public Information  
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Our state and local public health mission is to protect the communities’ health and the well-being of individuals of all ages by assuring the early detection and the rapid, coordinated response to all public health emergencies, both natural and deliberate.